

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Republican Party of Louisiana

ADDRESS (number and street)

11440 North Lake Sherwood Ave

☐Check if different  
than previously  
reported. (ACC)

Baton Rouge

LA

70816

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00187450

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☒January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2005

through

12

31

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charlie Buckels

Signature of Treasurer

Electronically Filed by Charlie Buckels

Date

09

21

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Republican Party of Louisiana

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		26813.61
(b) Cash on Hand at Beginning of Reporting Period .....	5932.19	
(c) Total Receipts (from Line 19) .....	114857.51	412958.93
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	120789.70	439772.54
7. Total Disbursements (from Line 31) .....	117177.17	436160.01
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3612.53	3612.53
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	98126.78	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Republican Party of Louisiana

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	57247.00	182080.00
(i) Itemized (use Schedule A) .....	1760.28	36367.92
(ii) Unitemized .....	59007.28	218447.92
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	5000.00	18700.00
(c) Other Political Committees (such as PACs) .....	64007.28	237147.92
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	2000.00	2000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	1889.98	2463.30
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	46960.25	171347.71
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	46960.25	171347.71
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	114857.51	412958.93
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	67897.26	241611.22

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		8287.05	30043.03
(i) Federal Share.....			
(ii) Non-Federal Share.....		46960.25	170243.37
(b) Other Federal Operating Expenditures.....		61929.87	234279.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		117177.17	434566.01
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		0.00	0.00
24. Independent Expenditure (use Schedule E) .....		0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....		0.00	0.00
26. Loan Repayments Made.....		0.00	0.00
27. Loans Made.....		0.00	0.00
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....		0.00	1594.00
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		0.00	1594.00
29. Other Disbursements.....		0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....		0.00	0.00
(ii) "Levin" Share .....		0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....		0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..		117177.17	436160.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		70216.92	265916.64

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	64007.28	237147.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1594.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	64007.28	235553.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	70216.92	264322.64
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	1889.98	2463.30
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	68326.94	261859.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
E. J. Alexander  
Mailing Address 301 Leonpacher Road

City State Zip Code  
Lafayette LA 70508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
State Of Louisiana

Occupation  
Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 3 / 2 0 0 5

Transaction ID: 093020057C56135

Amount of Each Receipt this Period

1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Anthony Blalock  
Mailing Address 202 Perdido Ln

City State Zip Code  
Lafayette LA 70503-5828

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Acadiana Renal Physicians

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 5

Transaction ID: 60116.C56174

Amount of Each Receipt this Period

1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Martin Cancienne  
Mailing Address PO Box 36

City State Zip Code  
Belle Rose LA 70341-0036

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DMC Consultors

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 5

Transaction ID: 60116.C56176

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** William Cassidy

Mailing Address 3115 Dalrymple Dr

City State Zip Code  
 Baton Rouge LA 70802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LSUHSC

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 2 / 2 0 0 5

Transaction ID: 60116.C56170

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** Marcelle Citron

Mailing Address Hub City Ford  
 303 Worth Ave

City State Zip Code  
 Lafayette LA 70508

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hub City Ford

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60116.C56175

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** A. G. Crowe

Mailing Address 195 Strawberry St

City State Zip Code  
 Slidell LA 70460-1936

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Best efforts

Occupation  
Best efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 1 4 / 2 0 0 5

Transaction ID: 60116.C56196

Amount of Each Receipt this Period

2500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Joseph Darlak  
Mailing Address 422 Lowerline St.

City State Zip Code  
New Orleans LA 70118-3710

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1994.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 5

Transaction ID: 093020057C56122

Amount of Each Receipt this Period

40.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Cindy Dore  
Mailing Address 404 Briargate

City State Zip Code  
Lafayette LA 70503

FEC ID number of contributing federal political committee.

C

Name of Employer  
IPC IncOccupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 0 / 2 0 0 5

Transaction ID: 093020057C56137

Amount of Each Receipt this Period

2000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael Francis  
Mailing Address PO Box 1694

City State Zip Code  
Crowley LA 70527-1694

FEC ID number of contributing federal political committee.

C

Name of Employer  
Francis Drilling FluidsOccupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: 60116.C56173

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

7040.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
James Garvey Jr.  
Mailing Address 3501 N Causeway Blvd Ste 314

City State Zip Code  
Metairie LA 70002-3628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 1 / 2 0 0 5

Transaction ID: 093020057C56025

Amount of Each Receipt this Period

1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Eustis Guillemet  
Mailing Address 3443 Esplanade Ave. , Apt. 436

City State Zip Code  
New Orleans LA 70119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amtrack

Occupation  
Service Attendant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 5 / 2 0 0 5

Transaction ID: 093020057C56089

Amount of Each Receipt this Period

100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Eustis Guillemet  
Mailing Address 3443 Esplanade Ave. , Apt. 436

City State Zip Code  
New Orleans LA 70119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amtrack

Occupation  
Service Attendant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 5

Transaction ID: 093020057C56121

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)

Larry J. Katz

Mailing Address 3544 Alan St.

City State Zip Code  
 Metairie LA 70002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 5

Transaction ID: 093020057C56061

Amount of Each Receipt this Period

1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Christopher M. Kinsey

Mailing Address 401 Edwards St, Ste 1805

City State Zip Code  
 Shreveport LA 71101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kinsey Interests Inc

Occupation  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 5

Transaction ID: 093020057C56110

Amount of Each Receipt this Period

1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

Chris Landry

Mailing Address PO Box 280

City State Zip Code  
 Maurice LA 70555

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Excaliber Support Services

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 0 7 / 2 0 0 5

Transaction ID: 51111.C56142

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
Crowley LA 70526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LA Pac Manufacturing

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

167.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: 093020057C56064

Amount of Each Receipt this Period

72.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
Crowley LA 70526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LA Pac Manufacturing

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 0 5

Transaction ID: 093020057C56133

Amount of Each Receipt this Period

100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
Crowley LA 70526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LA Pac Manufacturing

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 7 / 2 0 0 5

Transaction ID: 60116.C56229

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

197.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)

Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
 Crowley LA 70526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LA Pac Manufacturing

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

322.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 1 7 / 2 0 0 5

Transaction ID: 51111.C56159

Amount of Each Receipt this Period

30.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Edward Leger

Mailing Address 1116 N. Ave. D

City State Zip Code  
 Crowley LA 70526

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LA Pac Manufacturing

Occupation  
General Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 2 / 0 2 / 2 0 0 5

Transaction ID: 60116.C56230

Amount of Each Receipt this Period

30.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

Robert Merrick

Mailing Address 5700 Citrus Blvd Ste A4

City State Zip Code  
 New Orleans LA 70123-8502

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Latter & Blum Inc.

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 8 / 2 0 0 5

Transaction ID: 60116.C56171

Amount of Each Receipt this Period

10000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

10060.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Lee Mills		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 9 / 2 0 0 5
Mailing Address PO Box 51454		<b>Transaction ID:</b> 093020057C56048
City Lafayette	State LA	Zip Code 70505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Oil & Gas	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Sandra Mills		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 0 / 2 0 0 5
Mailing Address PO Box 52592		<b>Transaction ID:</b> 51111.C56157
City Lafayette	State LA	Zip Code 70505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer N/A	Occupation Homemaker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Sandra Mills		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address PO Box 52592		<b>Transaction ID:</b> 60116.C56168
City Lafayette	State LA	Zip Code 70505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer N/A	Occupation Homemaker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)

William Mills

Mailing Address PO Box 52592

City State Zip Code  
 Lafayette LA 70505

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WPM Exploration

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9087.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 0 6 / 2 0 0 5

Transaction ID: 51111.C56146

Amount of Each Receipt this Period

4000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)

Linda Nall

Mailing Address 8609 Grover PI

City State Zip Code  
 Shreveport LA 71115-2709

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LSUMC

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 5

Transaction ID: 093020057C56111

Amount of Each Receipt this Period

50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)

Gail Romero

Mailing Address PO Box 52748

City State Zip Code  
 Lafayette LA 70505

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Van Eaton & Romero, Inc.

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 7 / 2 0 0 5

Transaction ID: 51111.C56158

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

5050.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Benita Scott  
Mailing Address 1322 Brooklyn Avenue

City State Zip Code  
Metairie LA 70010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
East Jefferson General Ho-  
spita

Occupation  
activities therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 2 / 2 0 0 5

Transaction ID: 093020057C56119

Amount of Each Receipt this Period

100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles Smith  
Mailing Address 221 Irene Road

City State Zip Code  
Zachary LA 70791

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pointer Smith Contracting  
Corp

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 5 / 2 0 0 5

Transaction ID: 60116.C56232

Amount of Each Receipt this Period

1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lehrue Stevens  
Mailing Address 830 Bayou Pines Dr

City State Zip Code  
Lake Charles LA 70601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Pathology Lab

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 8 / 2 0 0 5

Transaction ID: 093020057C56076

Amount of Each Receipt this Period

2000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

3100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Polly Thomas		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5
Mailing Address 3230 Metairie Court		<b>Transaction ID:</b> 60116.C56184
City Metairie	State LA	Zip Code 70002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer UNO	Occupation Professor	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Bert Turner		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 3 / 2 0 0 5
Mailing Address P.O. Box 2750		<b>Transaction ID:</b> 093020057C56054
City Baton Rouge	State LA	Zip Code 70821
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Turner Industries, Ltd.	Occupation Chairman	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Christian Ulrich		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 5601 Bon Aire Dr.		<b>Transaction ID:</b> 093020057C56093
City Monroe	State LA	Zip Code 71203
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Physican	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Ruth Ulrich  
Mailing Address 406 Forsythe Avenue

City State Zip Code  
Monroe LA 71201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Out of the Box Designs

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 2 / 2 0 0 5

Transaction ID: 093020057C56118

Amount of Each Receipt this Period

100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ruth Ulrich  
Mailing Address 406 Forsythe Avenue

City State Zip Code  
Monroe LA 71201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Out of the Box Designs

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 6 / 2 0 0 5

Transaction ID: 093020057C56139

Amount of Each Receipt this Period

100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ruth Ulrich  
Mailing Address 406 Forsythe Avenue

City State Zip Code  
Monroe LA 71201

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Out of the Box Designs

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 1 / 2 0 0 5

Transaction ID: 51111.C56164

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 107

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Ruth Ulrich		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 5 / 2 0 0 5
Mailing Address 406 Forsythe Avenue		<b>Transaction ID:</b> 60116.C56165
City Monroe	State LA	Zip Code 71201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Out of the Box Designs	Occupation President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ruth Ulrich		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 6 / 2 0 0 5
Mailing Address 406 Forsythe Avenue		<b>Transaction ID:</b> 60116.C56193
City Monroe	State LA	Zip Code 71201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Out of the Box Designs	Occupation President	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kathleen Vogt		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 1 / 2 0 0 5
Mailing Address 232 Lake Marina Avenue Unit 11-B		<b>Transaction ID:</b> 093020057C56051
City New Orleans	State LA	Zip Code 70124
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer N/A	Occupation Homemaker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Benton Young Mailing Address 1300 E Main St City State Zip Code Jonesboro LA 71251 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 5 <b>Transaction ID:</b> 093020057C56130 Amount of Each Receipt this Period 100.00 Receipt
Name of Employer Royale Corp. of Jonesboro Occupation Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 200.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Nelson Yount Mailing Address 105 Tall Oaks Trail City State Zip Code West Monroe LA 71291 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5 <b>Transaction ID:</b> 093020057C56090 Amount of Each Receipt this Period 5000.00 Receipt
Name of Employer Self Employed Occupation Physican Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 9666.00		

SUBTOTAL of Receipts This Page (optional) .....

5100.00

TOTAL This Period (last page this line number only) .....

57247.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 107

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)  
Committee to Re-Elect Bobby Jindal

Mailing Address 8850 United Plaza Suite 1001

City	State	Zip Code
Baton Rouge	LA	70809

FEC ID number of contributing  
federal political committee.**C** C00408823

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	5

Transaction ID: 60116.C56172

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

5000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 107

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A.** Full Name (Last, First, Middle Initial)

South Carolina Republican Party

Mailing Address 1508 Lady St

City State Zip Code  
 Columbia SC 29201-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 2 9 / 2 0 0 5

Transaction ID: 60116.C56180

Amount of Each Receipt this Period

1000.00

Transfers From Affil./Aut-  
h.

**B.** Full Name (Last, First, Middle Initial)

Ohio Republican Party

Mailing Address 211 S 5th St

City State Zip Code  
 Columbus OH 43215-5203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 2 9 / 2 0 0 5

Transaction ID: 60116.C56185

Amount of Each Receipt this Period

1000.00

Transfers From Affil./Aut-  
h.

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

2000.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 107

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Intuit		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 5	
Mailing Address PO Box 513135		<b>Transaction ID:</b> 60127.C56357	
City Los Angeles	State CA	Zip Code 90051-1135	Amount of Each Receipt this Period 238.96
FEC ID number of contributing federal political committee. C		Offsets to Operating Expenditures	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.96		

  

<b>B.</b> Full Name (Last, First, Middle Initial) US Post Office		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 5	
Mailing Address 10380 Perkins Rd		<b>Transaction ID:</b> 093020057C56112	
City Baton Rouge	State LA	Zip Code 70810-1601	Amount of Each Receipt this Period 1522.92
FEC ID number of contributing federal political committee. C		Offsets to Operating Expenditures	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1522.92		

SUBTOTAL of Receipts This Page (optional) .....

1761.88

TOTAL This Period (last page this line number only) .....

1761.88

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Advanced Office Systems**

Mailing Address 11434 Industriplex

City Baton Rouge State LA Zip Code 70884-

Purpose of Disbursement  
COMPUTER SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12392

Date of Disbursement

/   /

Amount of Each Disbursement this Period

242.53

COMPUTER SERVICE

Full Name (Last, First, Middle Initial)

## **B. Advanced Office Systems**

Mailing Address 11434 Industriplex

City Baton Rouge State LA Zip Code 70884-

Purpose of Disbursement  
PRINTING & COMP SERV

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12389

Date of Disbursement

/   /

Amount of Each Disbursement this Period

304.39

PRINTING & COMP SERV

Full Name (Last, First, Middle Initial)

## **C. AICCO, Inc**

Mailing Address 1630 E Shaw Ave Ste 160

City Fresno State CA Zip Code 93710-8109

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12259

Date of Disbursement

/   /

Amount of Each Disbursement this Period

198.82

INSURANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

745.74

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** AICCO, Inc

Mailing Address 1630 E Shaw Ave Ste 160

City Fresno State CA Zip Code 93710-8109

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12270

Date of Disbursement

/   /

Amount of Each Disbursement this Period

208.76

INSURANCE

Full Name (Last, First, Middle Initial)

**B.** AICCO, Inc

Mailing Address 1630 E Shaw Ave Ste 160

City Fresno State CA Zip Code 93710-8109

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12338

Date of Disbursement

/   /

Amount of Each Disbursement this Period

198.82

INSURANCE

Full Name (Last, First, Middle Initial)

**C.** AICCO, Inc

Mailing Address 1630 E Shaw Ave Ste 160

City Fresno State CA Zip Code 93710-8109

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12369

Date of Disbursement

/   /

Amount of Each Disbursement this Period

198.82

INSURANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

606.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** American Express-Delta

Mailing Address P. O. Box 360002

City State Zip Code  
Ft Lauderdale FL 33336-0002

Purpose of Disbursement  
PAYMENT OF DEBT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60123.E12456

Date of Disbursement

/   /

Amount of Each Disbursement this Period

PAYMENT OF DEBT

Full Name (Last, First, Middle Initial)

**B.** American Express-Delta

Mailing Address P. O. Box 360002

City State Zip Code  
Ft Lauderdale FL 33336-0002

Purpose of Disbursement  
FINANCE CHG

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12305

Date of Disbursement

/   /

Amount of Each Disbursement this Period

FINANCE CHG

Full Name (Last, First, Middle Initial)

**C.** American Express-Delta

Mailing Address P. O. Box 360002

City State Zip Code  
Ft Lauderdale FL 33336-0002

Purpose of Disbursement  
FINANCE CHGS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12267

Date of Disbursement

/   /

Amount of Each Disbursement this Period

FINANCE CHGS

**SUBTOTAL** of Disbursements This Page (optional) .....

**1235.43**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** American Express-Delta

Mailing Address P. O. Box 360002

City State Zip Code  
Ft Lauderdale FL 33336-0002

Purpose of Disbursement  
FINANCE CHGS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12334

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

FINANCE CHGS

Full Name (Last, First, Middle Initial)

**B.** American Express-Delta

Mailing Address P. O. Box 360002

City State Zip Code  
Ft Lauderdale FL 33336-0002

Purpose of Disbursement  
FINANCE CHG

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60123.E12457

Date of Disbursement

/   /

Amount of Each Disbursement this Period

370.39

FINANCE CHG

Full Name (Last, First, Middle Initial)

**C.** American Express-Delta

Mailing Address P. O. Box 360002

City State Zip Code  
Ft Lauderdale FL 33336-0002

Purpose of Disbursement  
PAYMENT OF DEBT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12387

Date of Disbursement

/   /

Amount of Each Disbursement this Period

629.61

PAYMENT OF DEBT

**SUBTOTAL** of Disbursements This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. American Express-Delta**

Mailing Address P. O. Box 360002

City Ft Lauderdale State FL Zip Code 33336-0002

Purpose of Disbursement  
FINANCE CHGS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60116.E12408

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

329.70

FINANCE CHGS

Full Name (Last, First, Middle Initial)

## **B. Blue Cross Blue Shield**

Mailing Address PO Box 261798

City Baton Rouge State LA Zip Code 70826-

Purpose of Disbursement  
EMPLOYEE BENEFIT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12262

Date of Disbursement

09 / 10 / 2005

Amount of Each Disbursement this Period

215.15

EMPLOYEE BENEFIT

Full Name (Last, First, Middle Initial)

## **C. Blue Cross Blue Shield**

Mailing Address PO Box 261798

City Baton Rouge State LA Zip Code 70826-

Purpose of Disbursement  
EMPLOYEE HLTH INS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60116.E12375

Date of Disbursement

11 / 22 / 2005

Amount of Each Disbursement this Period

215.15

EMPLOYEE HLTH INS

**SUBTOTAL** of Disbursements This Page (optional) .....

760.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Capital Promotions**

Mailing Address 2122 Palmwood Dr

City Baton Rouge State LA Zip Code 70816-2840

Purpose of Disbursement  
BUMPER STICKERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60116.E12384

Date of Disbursement

/   /

Amount of Each Disbursement this Period

311.00

BUMPER STICKERS

## **B. CC Sales**

Mailing Address PO Box 73501

City Metairie State LA Zip Code 70033-3501

Purpose of Disbursement  
SUPPLIES- NAME TAGS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 51111.E12315

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

SUPPLIES- NAME TAGS

## **C. CC Sales**

Mailing Address PO Box 73501

City Metairie State LA Zip Code 70033-3501

Purpose of Disbursement  
SUPPLIES- NAME TAGS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 51111.E12291

Date of Disbursement

/   /

Amount of Each Disbursement this Period

411.44

SUPPLIES- NAME TAGS

**SUBTOTAL** of Disbursements This Page (optional) .....

972.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 29 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60131.E12468 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 0 5</div> </div>	
Mailing Address 6880 Christopher		<b>Amount of Each Disbursement this Period</b> <div>683.42</div>	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement PAYROLL	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	PAYROLL		
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60127.E12460 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 5</div> </div>	
Mailing Address 6880 Christopher		<b>Amount of Each Disbursement this Period</b> <div>683.42</div>	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement PAYROLL	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	PAYROLL		
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 51111.E12256 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 3 / 2 0 0 5</div> </div>	
Mailing Address 6880 Christopher		<b>Amount of Each Disbursement this Period</b> <div>74.00</div>	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement REIMBURSE STAMPS	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	REIMBURSE STAMPS		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1440.84**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 51111.E12263 <b>Date of Disbursement</b> <div> <div>09</div> <div>15</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>111.00</div>
Purpose of Disbursement POSTAGE REIMBURSEMENT		<div>Category/Type</div>	POSTAGE REIMBURSEMENT
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 51111.E12276 <b>Date of Disbursement</b> <div> <div>09</div> <div>30</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>683.42</div>
Purpose of Disbursement PAYROLL		<div>Category/Type</div>	PAYROLL
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60127.E12462 <b>Date of Disbursement</b> <div> <div>10</div> <div>14</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>683.42</div>
Purpose of Disbursement PAYROLL		<div>Category/Type</div>	PAYROLL
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**1477.84**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 51111.E12327 <b>Date of Disbursement</b> <div> <div>11</div> <div>01</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>69.73</div>
Purpose of Disbursement POSTAGE OFC SUPPLIES		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		POSTAGE OFC SUPPLIES	
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 51111.E12331 <b>Date of Disbursement</b> <div> <div>11</div> <div>01</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>683.42</div>
Purpose of Disbursement PAYROLL		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		PAYROLL	
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 51111.E12330 <b>Date of Disbursement</b> <div> <div>11</div> <div>01</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher			
City Greenwell Springs	State LA	Zip Code 70739-	Amount of Each Disbursement this Period <div>683.42</div>
Purpose of Disbursement PAYROLL		<div></div>	
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
		PAYROLL	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1436.57**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60116.E12394 <b>Date of Disbursement</b> <div> <div>11</div> <div>10</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher		Amount of Each Disbursement this Period <div>683.42</div>	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement PAYROLL Candidate Name	<div>Category/Type</div>	PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60116.E12377 <b>Date of Disbursement</b> <div> <div>11</div> <div>22</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher		Amount of Each Disbursement this Period <div>270.55</div>	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement POSTAGE REIMBURSEMENT Candidate Name	<div>Category/Type</div>	POSTAGE REIMBURSEMENT
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Karen Connolly		<b>Transaction ID:</b> 60116.E12380 <b>Date of Disbursement</b> <div> <div>11</div> <div>23</div> <div>2005</div> </div>	
Mailing Address 6880 Christopher		Amount of Each Disbursement this Period <div>683.42</div>	
City Greenwell Springs State LA Zip Code 70739-	Purpose of Disbursement PAYROLL Candidate Name	<div>Category/Type</div>	PAYROLL
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>1637.39</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Ellen Wray Davis		<b>Transaction ID:</b> 60127.E12464 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 6 / 2 0 0 5</div> </div>	
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period <div>1317.36</div>	
City Baton Rouge	State LA		Zip Code 70810-
Purpose of Disbursement PAYROLL			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Ellen Wray Davis		<b>Transaction ID:</b> 51111.E12275 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 0 5</div> </div>	
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period <div>1317.36</div>	
City Baton Rouge	State LA		Zip Code 70810-
Purpose of Disbursement PAYROLL			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Ellen Wray Davis		<b>Transaction ID:</b> 60127.E12466 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 4 / 2 0 0 5</div> </div>	
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period <div>1317.36</div>	
City Baton Rouge	State LA		Zip Code 70810-
Purpose of Disbursement PAYROLL			<div>Category/Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**3952.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Ellen Wray Davis		<b>Transaction ID:</b> 60127.E12467 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 8 / 2 0 0 5</div> </div>
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period <div>1317.36</div>
City Baton Rouge      State LA      Zip Code 70810-		
Purpose of Disbursement PAYROLL	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL
<b>B.</b> Full Name (Last, First, Middle Initial) Ellen Wray Davis		<b>Transaction ID:</b> 51111.E12337 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 1 / 2 0 0 5</div> </div>
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period <div>1317.36</div>
City Baton Rouge      State LA      Zip Code 70810-		
Purpose of Disbursement PAYROLL	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL
<b>C.</b> Full Name (Last, First, Middle Initial) Ellen Wray Davis		<b>Transaction ID:</b> 60116.E12381 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 2 3 / 2 0 0 5</div> </div>
Mailing Address 10426 Springpark Ave		Amount of Each Disbursement this Period <div>1317.36</div>
City Baton Rouge      State LA      Zip Code 70810-		
Purpose of Disbursement PAYROLL	<div>Category/Type</div>	
Candidate Name	<div>Category/Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:              District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

**3952.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Demco</b> Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 2153 City Birmingham State AL Zip Code 35287-1340 Purpose of Disbursement ELECTRICITY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51111.E12272</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 5 Amount of Each Disbursement this Period 251.28 ELECTRICITY
<b>B. Demco</b> Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 2153 City Birmingham State AL Zip Code 35287-1340 Purpose of Disbursement UTILITIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60116.E12372</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 0 5 Amount of Each Disbursement this Period 172.08 UTILITIES
<b>C. Direct Mailing Services, Inc</b> Full Name (Last, First, Middle Initial) Mailing Address 12511 East Millburn Avenue City Baton Rouge State LA Zip Code 70815- Purpose of Disbursement FUNDRAISING CONSULTING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51111.E12255</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 5 Amount of Each Disbursement this Period 2000.00 FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

**2423.36**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Direct Mailing Services, Inc**

Mailing Address 12511 East Millburn Avenue

City Baton Rouge State LA Zip Code 70815-

Purpose of Disbursement  
FUNDRAISING CONSULTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12269

Date of Disbursement

09 / 15 / 2005

Amount of Each Disbursement this Period

2000.00

FUNDRAISING CONSULTATION

Full Name (Last, First, Middle Initial)

## **B. Direct Mailing Services, Inc**

Mailing Address 12511 East Millburn Avenue

City Baton Rouge State LA Zip Code 70815-

Purpose of Disbursement  
STRATEGY CONSULTING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60116.E12367

Date of Disbursement

11 / 29 / 2005

Amount of Each Disbursement this Period

2000.00

STRATEGY CONSULTING SERVI-  
CES

Full Name (Last, First, Middle Initial)

## **C. Eatel**

Mailing Address P. O. Box 60838

City New Orleans State LA Zip Code 70160-0838

Purpose of Disbursement  
OFFICE TELEPHONE EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12261

Date of Disbursement

09 / 13 / 2005

Amount of Each Disbursement this Period

518.70

OFFICE TELEPHONE EXPENSE

**SUBTOTAL** of Disbursements This Page (optional) .....

4518.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A. Eatel</b> Full Name (Last, First, Middle Initial) Mailing Address P. O. Box 60838 City New Orleans State LA Zip Code 70160-0838 Purpose of Disbursement TELEPHONE SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60116.E12376</b> Date of Disbursement 11 / 22 / 2005 Amount of Each Disbursement this Period 484.05 TELEPHONE SERVICE
<b>B. DH Publications</b> Full Name (Last, First, Middle Initial) Mailing Address 17223 Deer Meadow Ave City Baton Rouge State LA Zip Code 70816- Purpose of Disbursement GOV GALA INVITATIONS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51111.E12251</b> Date of Disbursement 07 / 13 / 2005 Amount of Each Disbursement this Period 500.00 GOV GALA INVITATIONS
<b>C. DH Publications</b> Full Name (Last, First, Middle Initial) Mailing Address 17223 Deer Meadow Ave City Baton Rouge State LA Zip Code 70816- Purpose of Disbursement GOV GALA INVITATIONS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51111.E12250</b> Date of Disbursement 07 / 13 / 2005 Amount of Each Disbursement this Period 673.15 GOV GALA INVITATIONS

**SUBTOTAL** of Disbursements This Page (optional) .....

1657.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 38 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. DH Publications**

Mailing Address 17223 Deer Meadow Ave

City Baton Rouge State LA Zip Code 70816-

Purpose of Disbursement  
GOV GALA INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12311

Date of Disbursement

08 / 12 / 2005

Amount of Each Disbursement this Period

500.00

GOV GALA INVITATIONS

## **B. Iberia Bank**

Mailing Address 3700 Essen Ln

City Baton Rouge State LA Zip Code 70809-

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12277

Date of Disbursement

08 / 09 / 2005

Amount of Each Disbursement this Period

657.09

PAYROLL TAXES

## **C. Iberia Bank**

Mailing Address 3700 Essen Ln

City Baton Rouge State LA Zip Code 70809-

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12304

Date of Disbursement

08 / 19 / 2005

Amount of Each Disbursement this Period

731.45

PAYROLL TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

1888.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Iberia Bank</b>		<b>Transaction ID:</b> 51111.E12279 <b>Date of Disbursement</b> <div> <div>08</div> <div>26</div> <div>2005</div> </div>	
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period <div>221.46</div>	
City Baton Rouge	State LA		Zip Code 70809-
Purpose of Disbursement CREDIT CARD MACHINE			<div>Category/ Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		CREDIT CARD MACHINE

  

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Iberia Bank</b>		<b>Transaction ID:</b> 51111.E12319 <b>Date of Disbursement</b> <div> <div>09</div> <div>12</div> <div>2005</div> </div>	
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period <div>48.71</div>	
City Baton Rouge	State LA		Zip Code 70809-
Purpose of Disbursement BANK SERVICE CHG			<div>Category/ Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		BANK SERVICE CHG

  

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Iberia Bank</b>		<b>Transaction ID:</b> 51111.E12340 <b>Date of Disbursement</b> <div> <div>10</div> <div>11</div> <div>2005</div> </div>	
Mailing Address 3700 Essen Ln		Amount of Each Disbursement this Period <div>46.49</div>	
City Baton Rouge	State LA		Zip Code 70809-
Purpose of Disbursement BANK SERVICE CHAGS			<div>Category/ Type</div>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		BANK SERVICE CHAGS

**SUBTOTAL** of Disbursements This Page (optional) .....

**316.66**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** Iberia Bank

Mailing Address 3700 Essen Ln

City Baton Rouge State LA Zip Code 70809-

Purpose of Disbursement  
CREDIT CARD FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 51111.E12332

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

10.00

CREDIT CARD FEES

Full Name (Last, First, Middle Initial)

**B.** Iberia Bank

Mailing Address 3700 Essen Ln

City Baton Rouge State LA Zip Code 70809-

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60116.E12366

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

15.00

MERCHANT FEE

Full Name (Last, First, Middle Initial)

**C.** Iberia Bank

Mailing Address 3700 Essen Ln

City Baton Rouge State LA Zip Code 70809-

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60116.E12434

Date of Disbursement

12 / 14 / 2005

Amount of Each Disbursement this Period

10.00

MERCHANT FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

35.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Jamestown Associates		<b>Transaction ID:</b> 51111.E12253 <b>Date of Disbursement</b> <div> <div>08</div> <div>26</div> <div>2005</div> </div>
Mailing Address 5 Mapleton Rd, Suite 300		Amount of Each Disbursement this Period <div>2000.00</div>
City Princeton State NJ Zip Code 08540-	Category/ Type	
Purpose of Disbursement PAYMENT ON DEBT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYMENT ON DEBT
<b>B.</b> Full Name (Last, First, Middle Initial) Jamestown Associates		<b>Transaction ID:</b> 60116.E12385 <b>Date of Disbursement</b> <div> <div>11</div> <div>17</div> <div>2005</div> </div>
Mailing Address 5 Mapleton Rd, Suite 300		Amount of Each Disbursement this Period <div>5000.00</div>
City Princeton State NJ Zip Code 08540-	Category/ Type	
Purpose of Disbursement PAYMENT ON DEBT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYMENT ON DEBT
<b>C.</b> Full Name (Last, First, Middle Initial) LA State Police Training Academy		<b>Transaction ID:</b> 60116.E12397 <b>Date of Disbursement</b> <div> <div>11</div> <div>04</div> <div>2005</div> </div>
Mailing Address 7901 Independence Blvd		Amount of Each Disbursement this Period <div>650.00</div>
City Baton Rouge State LA Zip Code 70806-6409	Category/ Type	
Purpose of Disbursement AUDITORIUM RENTAL SCC MTG EXPENSE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	AUDITORIUM RENTAL SCC MTG EXPENSE
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>7650.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. LA State Police Training Academy**

Mailing Address 7901 Independence Blvd

City State Zip Code  
Baton Rouge LA 70806-6409

Purpose of Disbursement  
SCC MTG EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12368

Date of Disbursement

/   /

Amount of Each Disbursement this Period

79.00

SCC MTG EXPENSE

Full Name (Last, First, Middle Initial)

## **B. LaBellas Catering, Inc**

Mailing Address 2219 Veterans Blvd.

City State Zip Code  
Kenner LA 70062-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12249

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

CATERING

Full Name (Last, First, Middle Initial)

## **C. LSU Alumni Association**

Mailing Address 3838 W Lakeshore Dr

City State Zip Code  
Baton Rouge LA 70808-

Purpose of Disbursement  
SCC MTG

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12393

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

SCC MTG

**SUBTOTAL** of Disbursements This Page (optional) .....

829.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) McDermott, Will & Emory		<b>Transaction ID:</b> 60116.E12383 <b>Date of Disbursement</b> <div> <div>11</div> <div>21</div> <div>2005</div> </div>	
Mailing Address 600 Thirteenth St. NW		Amount of Each Disbursement this Period <div>5236.24</div>	
City Washington State DC Zip Code 20005-	Purpose of Disbursement FEC LEGAL COUNSEL		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) MCREI Inc		<b>Transaction ID:</b> 51111.E12357 <b>Date of Disbursement</b> <div> <div>08</div> <div>17</div> <div>2005</div> </div>	
Mailing Address 3937 Pines Rd, Ste 1		Amount of Each Disbursement this Period <div>2000.00</div>	
City Shreveport State LA Zip Code 71119-	Purpose of Disbursement DEBT PAYMENT		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) MCREI Inc		<b>Transaction ID:</b> 51111.E12335 <b>Date of Disbursement</b> <div> <div>10</div> <div>20</div> <div>2005</div> </div>	
Mailing Address 3937 Pines Rd, Ste 1		Amount of Each Disbursement this Period <div>2000.00</div>	
City Shreveport State LA Zip Code 71119-	Purpose of Disbursement DEBT PAYMENT		
Candidate Name	Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>9236.24</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Eric Miller		<b>Transaction ID:</b> 51111.E12290 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 9 / 2 0 0 5</div> </div>
Mailing Address #5 Echezeaux		Amount of Each Disbursement this Period <div>474.00</div>
City Kenner State LA Zip Code 70065-	PHOTOGRAPHER  PHOTOGRAPHER	
Purpose of Disbursement PHOTOGRAPHER		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Murphy		<b>Transaction ID:</b> 51111.E12273 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 0 / 2 0 0 5</div> </div>
Mailing Address 17 Acadia Street		Amount of Each Disbursement this Period <div>480.00</div>
City Kenner State LA Zip Code 70065-	CLERICAL SERVICES  CLERICAL SERVICES	
Purpose of Disbursement CLERICAL SERVICES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Murphy		<b>Transaction ID:</b> 60116.E12395 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 1 0 / 2 0 0 5</div> </div>
Mailing Address 17 Acadia Street		Amount of Each Disbursement this Period <div>350.00</div>
City Kenner State LA Zip Code 70065-	CLERICAL SERVICES  CLERICAL SERVICES	
Purpose of Disbursement CLERICAL SERVICES		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1304.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin Murphy		<b>Transaction ID:</b> 51111.E12329 <b>Date of Disbursement</b> <div> <div>11</div> <div>01</div> <div>2005</div> </div>	
Mailing Address 17 Acadia Street		<b>Amount of Each Disbursement this Period</b> <div>340.00</div>	
City Kenner State LA Zip Code 70065-	Purpose of Disbursement CLERICAL SERVICES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	CLERICAL SERVICES		
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Murphy		<b>Transaction ID:</b> 60116.E12396 <b>Date of Disbursement</b> <div> <div>11</div> <div>04</div> <div>2005</div> </div>	
Mailing Address 17 Acadia Street		<b>Amount of Each Disbursement this Period</b> <div>420.00</div>	
City Kenner State LA Zip Code 70065-	Purpose of Disbursement CLERICAL SERVICES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	CLERICAL SERVICES		
<b>C.</b> Full Name (Last, First, Middle Initial) Office Depot Credit Plan		<b>Transaction ID:</b> 51111.E12274 <b>Date of Disbursement</b> <div> <div>09</div> <div>27</div> <div>2005</div> </div>	
Mailing Address P. O. Box 9020		<b>Amount of Each Disbursement this Period</b> <div>217.99</div>	
City Des Moines State IA Zip Code 50368-9020	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	OFFICE SUPPLIES		
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<div>977.99</div>	
<b>TOTAL</b> This Period (last page this line number only) .....		<div></div>	

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Office Depot Credit Plan**

Mailing Address P. O. Box 9020

City State Zip Code  
Des Moines IA 50368-9020

Purpose of Disbursement  
OFC SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51111.E12328

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

50.00

OFC SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. R & C Properties**

Mailing Address 16851 Cicero Ave

City State Zip Code  
Baton Rouge LA 70816-1853

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60116.E12398

Date of Disbursement

11 / 02 / 2005

Amount of Each Disbursement this Period

1925.00

RENT

Full Name (Last, First, Middle Initial)

## **C. Sgt David Ryerson**

Mailing Address 7901 Independence Blvd

City State Zip Code  
Baton Rouge LA 70806-6409

Purpose of Disbursement  
SECURITY FOR SCC MTG

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60116.E12391

Date of Disbursement

11 / 12 / 2005

Amount of Each Disbursement this Period

240.00

SECURITY FOR SCC MTG

**SUBTOTAL** of Disbursements This Page (optional) .....

2215.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Safeguard**

Mailing Address PO Box 88043

City Chicago State IL Zip Code 60680-1043

Purpose of Disbursement  
CHECKS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 51111.E12297

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.75

CHECKS

Full Name (Last, First, Middle Initial)

## **B. Safeguard**

Mailing Address PO Box 88043

City Chicago State IL Zip Code 60680-1043

Purpose of Disbursement  
CHECKS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 51111.E12258

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.50

CHECKS

Full Name (Last, First, Middle Initial)

## **C. Safeguard**

Mailing Address PO Box 88043

City Chicago State IL Zip Code 60680-1043

Purpose of Disbursement  
CHECK PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60116.E12374

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54.50

CHECK PRINTING

**SUBTOTAL** of Disbursements This Page (optional) .....

275.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 107

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

## **A. Tactical Solutions, LLC**

Mailing Address 8538 E. Cypress Point

City Baton Rouge State LA Zip Code 70809-

Purpose of Disbursement  
MEDIA CONSULTATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 51111.E12254**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

MEDIA CONSULTATION

Full Name (Last, First, Middle Initial)

## **B. Targeted Creative Communicatio**

Mailing Address 1000 Duke Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
DEBT PAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 51111.E12252**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

DEBT PAYMENT

Full Name (Last, First, Middle Initial)

## **C. Targeted Creative Communicatio**

Mailing Address 1000 Duke Street

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
DEBT PAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60116.E12386**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

DEBT PAYMENT

**SUBTOTAL** of Disbursements This Page (optional) .....

7250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 107

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

Full Name (Last, First, Middle Initial)

**A.** William Vanderbrook CPA

Mailing Address 4425 Clearview Pkwy  
2nd Floor

City Metairie State LA Zip Code 70006-2397

Purpose of Disbursement  
ACCTG SERVS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51111.E12336

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

ACCTG SERVS

Full Name (Last, First, Middle Initial)

**B.** William Vanderbrook CPA

Mailing Address 4425 Clearview Pkwy  
2nd Floor

City Metairie State LA Zip Code 70006-2397

Purpose of Disbursement  
ACCOUNTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12379

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

ACCOUNTING

Full Name (Last, First, Middle Initial)

**C.** Winning Strategies

Mailing Address PO Box 87174

City Baton Rouge State LA Zip Code 70879-

Purpose of Disbursement  
REPUBLICAN LDRSHIP COLUMNS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60116.E12390

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

REPUBLICAN LDRSHIP COLUMNS

**SUBTOTAL** of Disbursements This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

61394.25

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 50 / 107

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Baton Rouge MarriottNature of Debt (Purpose):  
Negotiated SettlementMailing Address Formerly the B.R. Hilton/Davidson  
1755 Lynnfield Road- Suite 142City State ZIP Code  
Memphis TN 38119-

Outstanding Balance Beginning This Period

181.00

Transaction ID: 5LS0614200111E5406

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

181.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
MCREI IncNature of Debt (Purpose):  
Debt Payment

Mailing Address 3937 Pines Rd, Ste 1

City State ZIP Code  
Shreveport LA 71119-

Outstanding Balance Beginning This Period

12519.84

Transaction ID: 9LS51111.E12335

Amount Incurred This Period

0.00

Payment This Period

4000.00

Outstanding Balance at Close of This Period

8519.84

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Bauer for PresidentNature of Debt (Purpose):  
Ballot Access Fee Refund

Mailing Address P O Box 6616

City State ZIP Code  
Arlington VA 22206-0616

Outstanding Balance Beginning This Period

3500.00

Transaction ID: 11LS0614200111E5408

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

**1) SUBTOTALS** This Period This Page (optional).....

12200.84

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 51 / 107

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Thomas GraphicsNature of Debt (Purpose):  
Yard Signs-Exempt Activity

Mailing Address P. O. Box 142226

City State ZIP Code  
Austin TX 78714-

Outstanding Balance Beginning This Period

2000.00

Transaction ID: 10LS50729.E12246

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Direct Mail Systems, Inc.Nature of Debt (Purpose):  
State Fundraising Solicitation

Mailing Address 12450 Automobile Blvd

City State ZIP Code  
Clearwater FL 33762-

Outstanding Balance Beginning This Period

2358.58

Transaction ID: 7LS50727.E12235

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2358.58

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Targeted Creative CommunicatioNature of Debt (Purpose):  
Debt Payment

Mailing Address 1000 Duke Street

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

49000.00

Transaction ID: 13LS51111.E12252

Amount Incurred This Period

0.00

Payment This Period

6000.00

Outstanding Balance at Close of This Period

43000.00

**1) SUBTOTALS** This Period This Page (optional).....

47358.58

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Targeted Creative CommunicatioNature of Debt (Purpose):  
Volunteer Mass Mail

Mailing Address 1000 Duke Street

City State ZIP Code  
Alexandria VA 22314-

Outstanding Balance Beginning This Period

15400.11

Transaction ID: 3LS50727.E12234

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15400.11

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Jamestown AssociatesNature of Debt (Purpose):  
Payment on debt

Mailing Address 5 Mapleton Rd, Suite 300

City State ZIP Code  
Princeton NJ 08540-

Outstanding Balance Beginning This Period

17800.00

Transaction ID: 1LS51111.E12253

Amount Incurred This Period

0.00

Payment This Period

7000.00

Outstanding Balance at Close of This Period

10800.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
American Express-DeltaNature of Debt (Purpose):  
Payment of debt

Mailing Address P. O. Box 360002

City State ZIP Code  
Ft Lauderdale FL 33336-0002

Outstanding Balance Beginning This Period

13531.10

Transaction ID: LS60116.E12387

Amount Incurred This Period

0.00

Payment This Period

1163.85

Outstanding Balance at Close of This Period

12367.25

**1) SUBTOTALS** This Period This Page (optional).....

38567.36

**2) TOTALS** This Period (last page this line number only).....

98126.78

**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)  
Republican Party of Louisiana

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X  Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %

Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 54 / 107  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 1 2 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1642.44

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1642.44

Transaction ID: H360124.C56331

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 1 9 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

6349.38

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

6349.38

Transaction ID: H360124.C56332

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 2 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

54.40

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

54.40

Transaction ID: H360124.C56354

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 8 / 2 7 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

272.93

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

272.93

Transaction ID: H360124.C56333

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 9 / 0 2 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1700.67

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1700.67

Transaction ID: H360124.C56334

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 9 / 0 6 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

3766.79

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

3766.79

Transaction ID: H360124.C56335

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 9 / 1 9 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1062.50

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1062.50

Transaction ID: H360124.C56340

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 9 / 2 0 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

95.90

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

95.90

Transaction ID: H360124.C56341

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 0 4 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1636.25

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1636.25

Transaction ID: H360124.C56342

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 1 8 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

580.91

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

580.91

Transaction ID: H360130.C56358

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 1 9 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

645.27

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

645.27

Transaction ID: H360124.C56343

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 0 / 2 7 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

59.50

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

59.50

Transaction ID: H360124.C56344

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 1 / 1 0 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

52.40

BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative** .....

52.40

Transaction ID: H360124.C56346

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 0 1 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

9699.21

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

9699.21

Transaction ID: H360124.C56345

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 0 2 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1119.76

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1119.76

Transaction ID: H360124.C56347

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 69 / 107  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 0 9 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1700.67

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1700.67

Transaction ID: H360124.C56348

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 1 2 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

38.32

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

38.32

Transaction ID: H360124.C56349

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 1 5 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

9637.11

**BREAKDOWN OF TRANSFER RECEIVED**

i) **Total Administrative** .....

9637.11

Transaction ID: H360124.C56350

ii) **Generic Voter Drive** .....

Transaction ID:

iii) **Exempt Activities** .....

Transaction ID:

iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) **Direct Candidate Support** (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC)

Transaction ID:

**TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED**

**TOTAL** This Period (Administrative) .....

**TOTAL** This Period (Generic Voter Drive) .....

**TOTAL** This Period (Exempt Activities) .....

**TOTAL** This Period (Direct Fundraising) .....

**TOTAL** This Period (Direct Candidate Support) .....

**TOTAL** This Period (Public Communications Referring Only to Party) .....

**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 72 / 107  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 2 3 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

3485.67

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

3485.67

Transaction ID: H360124.C56351

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 2 8 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

1119.76

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

1119.76

Transaction ID: H360124.C56352

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 74 / 107  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

NAME OF ACCOUNT  
 RPL- Federal 11140  
 North Lake Sherwoo

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 1 2 / 3 0 / 2 0 0 5

TOTAL AMOUNT TRANSFERRED

2240.41

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

2240.41

Transaction ID: H360124.C56353

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

Transaction ID:

b) .....

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

46960.25

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

46960.25

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**

The Storage Center

Mailing Address

1970 Staring Lane

City

State

Zip Code

Baton Rouge

LA

70810-

Purpose of Disbursement:  
Storage rentalCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

154505.22

Date 08 / 22 / 2005

Transaction ID: H451111.E12257

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.60

54.40

64.00

**B. Full Name (Last, First, Middle Initial)**

Hanover Insurance Company

Mailing Address

P. O. Box 4031

City

State

Zip Code

Woburn

MA

01888-4031

Purpose of Disbursement:  
InsuranceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

162571.44

Date 09 / 20 / 2005

Transaction ID: H451111.E12268

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.42

53.40

62.82

**C. Full Name (Last, First, Middle Initial)**

Catherine Clifford

Mailing Address

33826 Nancy Drive

City

State

Zip Code

Walker

LA

70785-

Purpose of Disbursement:  
office cleaningCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

162621.44

Date 09 / 20 / 2005

Transaction ID: H451111.E12271

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.50

42.50

50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

26.52

150.30

176.82

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 76 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City	State	Zip Code
Baton Rouge	LA	70810-

Purpose of Disbursement:  
 Payroll < 25% federal activ

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

153189.31

Date 

M	M
0	8

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12282

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

197.60

1119.76

1317.36

**B. Full Name (Last, First, Middle Initial)**  
 Karen Connolly

Mailing Address

6880 Christopher

City	State	Zip Code
Greenwell Springs	LA	70739-

Purpose of Disbursement:  
 salary < 25% FEDERAL ACTIV

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

153872.73

Date 

M	M
0	8

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12283

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

102.51

580.91

683.42

**C. Full Name (Last, First, Middle Initial)**  
 Kay Kellogg Katz

Mailing Address

207C Louisville Avenue

City	State	Zip Code
Monroe	LA	71201-

Purpose of Disbursement:  
 REIMBURSEMENT: SEE BELOW

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

154826.32

Date 

M	M
0	8

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12285

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

48.17

272.93

321.10

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

348.28

1973.60

2321.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**

Renaissance Cleveland Hotel

Mailing Address

24 Public Square

City	State	Zip Code
Cleveland	OH	44113-

Purpose of Disbursement:  
HOTELCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]HOTEL

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

321.10

Date 08 / 27 / 2005

Transaction ID: H460921.E13464

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

48.17

272.93

321.10

**B. Full Name (Last, First, Middle Initial)**

Karen Connolly

Mailing Address

6880 Christopher

City	State	Zip Code
Greenwell Springs	LA	70739-

Purpose of Disbursement:  
reimbursement postage, mileage cellCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

153981.80

Date 08 / 19 / 2005

Transaction ID: H451111.E12286

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

16.36

92.71

109.07

**C. Full Name (Last, First, Middle Initial)**

Moreson Conferencing, Inc.

Mailing Address

P O Box 4096

City	State	Zip Code
Montgomery	AL	36103-

Purpose of Disbursement:  
telephone expenseCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147064.46

Date 08 / 19 / 2005

Transaction ID: H451111.E12287

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.54

25.72

30.26

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

20.90

118.43

139.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Tactical Solutions, LLC

Mailing Address

8538 E. Cypress Point

City State Zip Code  
Baton Rouge LA 70809-

Purpose of Disbursement:  
Media Consult

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

162508.62

Date  M  M /  D  D /  Y  Y  Y  Y  
09 / 19 / 2005

Transaction ID: H451111.E12288

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
187.50		1062.50		1250.00

**B. Full Name (Last, First, Middle Initial)**  
Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City State Zip Code  
Baton Rouge LA 70810-

Purpose of Disbursement:  
Reimbursement: See Below

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151871.95

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2005

Transaction ID: H451111.E12289

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.33		738.54		868.87

**C. Full Name (Last, First, Middle Initial)**  
Blue Cross Blue Shield

Mailing Address

PO Box 261798

City State Zip Code  
Baton Rouge LA 70826-

Purpose of Disbursement:  
Health insurance

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

**[MEMO ITEM]** Health insurance

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

868.87

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2005

Transaction ID: H460921.E13467

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
130.33		738.54		868.87

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
317.83		1801.04		2118.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
McDermott, Will & Emory

Mailing Address

600 Thirteenth St. NW

City	State	Zip Code
Washington	DC	20005-

Purpose of Disbursement:  
FEC legal expenseCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149928.67

Date 08 / 19 / 2005

Transaction ID: H451111.E12292

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

300.00

1700.00

2000.00

**B. Full Name (Last, First, Middle Initial)**  
De Lage Landen Financial Svcs

Mailing Address

P. O. Box 41601

City	State	Zip Code
Philadelphia	PA	19101-1601

Purpose of Disbursement:  
office equip leaseCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151003.08

Date 08 / 19 / 2005

Transaction ID: H451111.E12293

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

49.23

278.96

328.19

**C. Full Name (Last, First, Middle Initial)**  
Telecommunication Systems, Inc

Mailing Address

Dept AT 49927

City	State	Zip Code
Atlanta	GA	31192-9927

Purpose of Disbursement:  
blackberry servicesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150304.27

Date 08 / 19 / 2005

Transaction ID: H451111.E12294

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

56.34

319.26

375.60

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

405.57

2298.22

2703.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 80 / 107  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Advanced Office Systems

Mailing Address

11434 Industriplex

 City State Zip Code  
Baton Rouge LA 70884-
Purpose of Disbursement:  
printingCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147178.67

Date 08 / 19 / 2005

Transaction ID: H451111.E12298

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.13

97.08

114.21

**B. Full Name (Last, First, Middle Initial)**  
S. Paul Dietzel II

Mailing Address

15333 Alma Mater Court

 City State Zip Code  
Baton Rouge LA 70810-
Purpose of Disbursement:  
clerical servicesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

154385.80

Date 08 / 19 / 2005

Transaction ID: H451111.E12299

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

60.60

343.40

404.00

**C. Full Name (Last, First, Middle Initial)**  
Canon Financial Services, Inc

Mailing Address

P. O. Box 4004

 City State Zip Code  
Carol Stream IL 60197-4004
Purpose of Disbursement:  
Copier RentalCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150674.89

Date 08 / 19 / 2005

Transaction ID: H451111.E12300

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

55.59

315.03

370.62

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

133.32

755.51

888.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 81 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Hanover Insurance Company

Mailing Address

P. O. Box 4031

City

State

Zip Code

Woburn

MA

01888-4031

Purpose of Disbursement:  
insuranceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147034.20

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2005

Transaction ID: H451111.E12301

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.42

53.40

62.82

**B. Full Name (Last, First, Middle Initial)**  
Quill

Mailing Address

PO Box 94081

City

State

Zip Code

Palatine

IL

60094-4081

Purpose of Disbursement:  
office suppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

154441.22

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2005

Transaction ID: H451111.E12302

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.31

47.11

55.42

**C. Full Name (Last, First, Middle Initial)**  
Aristotle International

Mailing Address

205 Pennsylvania Ave SE

City

State

Zip Code

Washington

DC

20003-

Purpose of Disbursement:  
softwareCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147928.67

Date  M  M /  D  D /  Y  Y  Y  Y  
08 / 19 / 2005

Transaction ID: H451111.E12303

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

112.50

637.50

750.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

130.23

738.01

868.24

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 82 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Aristotle International

Mailing Address

205 Pennsylvania Ave SE

City	State	Zip Code
Washington	DC	20003-

Purpose of Disbursement:  
softwareCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

146039.24

Date 08 / 12 / 2005

Transaction ID: H451111.E12306

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

112.50

637.50

750.00

**B. Full Name (Last, First, Middle Initial)**  
Blue Cross Blue Shield

Mailing Address

PO Box 261798

City	State	Zip Code
Baton Rouge	LA	70826-

Purpose of Disbursement:  
employee benefitsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

145254.25

Date 08 / 12 / 2005

Transaction ID: H451111.E12308

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

32.27

182.88

215.15

**C. Full Name (Last, First, Middle Initial)**  
Demco

Mailing Address

P. O. Box 2153

City	State	Zip Code
Birmingham	AL	35287-1340

Purpose of Disbursement:  
electricityCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

146826.09

Date 08 / 12 / 2005

Transaction ID: H451111.E12309

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

38.85

220.15

259.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

183.62

1040.53

1224.15

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 ADT Security Systems

Mailing Address

8683 Siegen Lane

City	State	Zip Code
Baton Rouge	LA	70810-

 Purpose of Disbursement:  
 security system
Category/  
Type
 Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

145289.24

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	0	5

Transaction ID: H451111.E12310

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.25

29.74

34.99

**B. Full Name (Last, First, Middle Initial)**  
 Eatel

Mailing Address

P. O. Box 60838

City	State	Zip Code
New Orleans	LA	70160-0838

 Purpose of Disbursement:  
 office telephone service
Category/  
Type
 Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

146567.09

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	0	5

Transaction ID: H451111.E12312

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

79.18

448.67

527.85

**C. Full Name (Last, First, Middle Initial)**  
 Karen Connolly

Mailing Address

6880 Christopher

City	State	Zip Code
Greenwell Springs	LA	70739-

 Purpose of Disbursement:  
 reimburse mileage/ supplies
Category/  
Type
 Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

146971.38

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	2	/	2	0	0	5

Transaction ID: H451111.E12313

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.79

123.50

145.29

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

106.22

601.91

708.13

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City State Zip Code

Baton Rouge LA 70810-

Purpose of Disbursement:  
 payroll < 25% federal activ

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

156143.68

Date M M / D D / Y Y Y Y  
0 9 / 0 2 / 2 0 0 5

Transaction ID: H451111.E12317

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

197.60

1119.76

1317.36

**B. Full Name (Last, First, Middle Initial)**  
 Karen Connolly

Mailing Address

6880 Christopher

City State Zip Code

Greenwell Springs LA 70739-

Purpose of Disbursement:  
 payroll < 25% federal activ

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

156827.10

Date M M / D D / Y Y Y Y  
0 9 / 0 2 / 2 0 0 5

Transaction ID: H451111.E12318

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

102.51

580.91

683.42

**C. Full Name (Last, First, Middle Initial)**  
 Karen Connolly

Mailing Address

6880 Christopher

City State Zip Code

Greenwell Springs LA 70739-

Purpose of Disbursement:  
 reimburse supplies/ mileage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

159333.62

Date M M / D D / Y Y Y Y  
0 9 / 0 6 / 2 0 0 5

Transaction ID: H451111.E12320

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.90

56.12

66.02

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

310.01

1756.79

2066.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Roger Villere

Mailing Address

838 Aurora Avenue

City State Zip Code

Metairie LA 70005-

Purpose of Disbursement:  
REIMBURSEMENT: SEE BELOW

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

159267.60

Date M M / D D / Y Y Y Y  
0 9 / 0 6 / 2 0 0 5

Transaction ID: H451111.E12321

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

366.08

2074.42

2440.50

**B. Full Name (Last, First, Middle Initial)**  
Holiday Inn- Shreveport

Mailing Address

102 Lake Street

City State Zip Code

Shreveport LA 71101-

Purpose of Disbursement:  
HOTEL

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM] HOTEL

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

178.70

Date M M / D D / Y Y Y Y  
0 9 / 0 6 / 2 0 0 5

Transaction ID: H460921.E13462

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

26.81

151.89

178.70

**C. Full Name (Last, First, Middle Initial)**  
Roger Villere

Mailing Address

838 Aurora Avenue

City State Zip Code

Metairie LA 70005-

Purpose of Disbursement:  
MILEAGE

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM] MILEAGE

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

2163.92

Date M M / D D / Y Y Y Y  
0 9 / 0 6 / 2 0 0 5

Transaction ID: H460921.E13460

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

324.59

1839.33

2163.92

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

366.08

2074.42

2440.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Bobby April Wireless

Mailing Address

1700 Veterans Blvd

City	State	Zip Code
Metairie	LA	70002-

Purpose of Disbursement:  
 TELEPHONE

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41  
**[MEMO ITEM]** TELEPHONE

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

97.88

Date 

M	M
0	9

 / 

D	D
0	6

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460921.E13461

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.68		83.20		97.88

**B. Full Name (Last, First, Middle Initial)**  
 R & C Properties

Mailing Address

16851 Cicero Ave

City	State	Zip Code
Baton Rouge	LA	70816-1853

Purpose of Disbursement:  
 rent

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

161258.62

Date 

M	M
0	9

 / 

D	D
0	6

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12322

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.75		1636.25		1925.00

**C. Full Name (Last, First, Middle Initial)**  
 R & C Properties

Mailing Address

16851 Cicero Ave

City	State	Zip Code
Baton Rouge	LA	70816-1853

Purpose of Disbursement:  
 rent

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

164546.44

Date 

M	M
1	0

 / 

D	D
0	4

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12339

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.75		1636.25		1925.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
577.50		3272.50		3850.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 87 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Catherine Clifford

Mailing Address

33826 Nancy Drive

City	State	Zip Code
Walker	LA	70785-

Purpose of Disbursement:  
office cleaning

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165601.82

Date 

M	M
1	0

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12342

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.50

42.50

50.00

**B. Full Name (Last, First, Middle Initial)**  
Karen Connolly

Mailing Address

6880 Christopher

City	State	Zip Code
Greenwell Springs	LA	70739-

Purpose of Disbursement:  
reimbursements

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165989.00

Date 

M	M
1	0

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12343

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

20.58

116.60

137.18

**C. Full Name (Last, First, Middle Initial)**  
Blue Cross Blue Shield

Mailing Address

PO Box 261798

City	State	Zip Code
Baton Rouge	LA	70826-

Purpose of Disbursement:  
emp benefit hlth ins

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165445.01

Date 

M	M
1	0

 / 

D	D
1	9

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H451111.E12344

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

32.27

182.88

215.15

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

60.35

341.98

402.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 88 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Demco

Mailing Address

P. O. Box 2153

City

State

Zip Code

Birmingham

AL

35287-1340

Purpose of Disbursement:  
 utilities

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165851.82

Date   /   /

Transaction ID: H451111.E12345

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

37.50

212.50

250.00

**B. Full Name (Last, First, Middle Initial)**  
 The Storage Center

Mailing Address

1970 Staring Lane

City

State

Zip Code

Baton Rouge

LA

70810-

Purpose of Disbursement:  
 storage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165551.82

Date   /   /

Transaction ID: H451111.E12346

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.60

37.40

44.00

**C. Full Name (Last, First, Middle Initial)**  
 Hanover Insurance Company

Mailing Address

P. O. Box 4031

City

State

Zip Code

Woburn

MA

01888-4031

Purpose of Disbursement:  
 insurance

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165507.82

Date   /   /

Transaction ID: H451111.E12347

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

9.42

53.39

62.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

53.52

303.29

356.81

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 89 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 LWCC

Mailing Address

P. O. Box 260237

City State Zip Code  
 Baton Rouge LA 70826-0237

Purpose of Disbursement:  
 workers comp ins

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166059.00

Date M M / D D / Y Y Y Y  
 1 0 / 2 7 / 2 0 0 5

Transaction ID: H451111.E12349

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

10.50

59.50

70.00

**B. Full Name (Last, First, Middle Initial)**  
 Iberia Bank

Mailing Address

3700 Essen Ln

City State Zip Code  
 Baton Rouge LA 70809-

Purpose of Disbursement:  
 serv chg

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166120.65

Date M M / D D / Y Y Y Y  
 1 1 / 1 0 / 2 0 0 5

Transaction ID: H460116.E12364

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

9.25

52.40

61.65

**C. Full Name (Last, First, Middle Initial)**  
 Iberia Bank

Mailing Address

3700 Essen Ln

City State Zip Code  
 Baton Rouge LA 70809-

Purpose of Disbursement:  
 payroll taxes

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

199733.40

Date M M / D D / Y Y Y Y  
 1 2 / 3 0 / 2 0 0 5

Transaction ID: H460116.E12399

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

312.42

1770.36

2082.78

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

332.17

1882.26

2214.43

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 90 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 LA Department of Revenue

Mailing Address

P. O. Box 91017

City	State	Zip Code
Baton Rouge	LA	70821-9017

Purpose of Disbursement:  
payroll taxesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

200286.40

Date 12 / 30 / 2005

Transaction ID: H460116.E12400

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.95		470.05		553.00

**B. Full Name (Last, First, Middle Initial)**  
 Iberia Bank

Mailing Address

3700 Essen Ln

City	State	Zip Code
Baton Rouge	LA	70809-

Purpose of Disbursement:  
bank chgsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

180894.71

Date 12 / 12 / 2005

Transaction ID: H460116.E12401

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.76		38.32		45.08

**C. Full Name (Last, First, Middle Initial)**  
 Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City	State	Zip Code
Baton Rouge	LA	70810-

Purpose of Disbursement:  
1125 payroll < 25% FEDERAL ACTIVCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

197650.62

Date 12 / 28 / 2005

Transaction ID: H460116.E12402

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.60		1119.76		1317.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
287.31		1628.13		1915.44

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 91 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**

Karen Connolly

Mailing Address

6880 Christopher

City

State

Zip Code

Greenwell Springs

LA

70739-

Purpose of Disbursement:

Payroll &lt; 25 % FEDERAL ACTIV

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

194399.84

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	5

Transaction ID: H460116.E12403

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

75.00

425.00

500.00

**B. Full Name (Last, First, Middle Initial)**

Karen Connolly

Mailing Address

6880 Christopher

City

State

Zip Code

Greenwell Springs

LA

70739-

Purpose of Disbursement:

payroll &lt; 25% federal activ

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

195083.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	5

Transaction ID: H460116.E12404

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

102.51

580.91

683.42

**C. Full Name (Last, First, Middle Initial)**

Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City

State

Zip Code

Baton Rouge

LA

70810-

Purpose of Disbursement:

1223 payroll &lt; 25% FEDERAL ACTIV

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

193899.84

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	5

Transaction ID: H460116.E12405

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

197.60

1119.76

1317.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

375.11

2125.67

2500.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 92 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**

Kevin Murphy

## Mailing Address

17 Acadia Street

City State Zip Code

Kenner LA 70065-

Purpose of Disbursement:  
Clerical servsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

192582.48

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	5

Transaction ID: H460116.E12406

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

52.50

297.50

350.00

**B. Full Name (Last, First, Middle Initial)**

James L Quinn

## Mailing Address

419 Northline St

City State Zip Code

Metairie LA 70005-4451

Purpose of Disbursement:  
prof servicesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

196333.26

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	0	5

Transaction ID: H460116.E12407

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

187.50

1062.50

1250.00

**C. Full Name (Last, First, Middle Initial)**

Kay Kellogg Katz

## Mailing Address

207C Louisville Avenue

City State Zip Code

Monroe LA 71201-

Purpose of Disbursement:  
REIMBURSEMENT: SEE BELOWCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

182130.44

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12411

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

136.30

772.37

908.67

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

376.30

2132.37

2508.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 93 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Capital Hilton

Mailing Address

16th &amp; K St NW

City	State	Zip Code
Washington	DC	20036-

Purpose of Disbursement:  
 HOTEL

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41  
**[MEMO ITEM]** HOTEL

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

908.67

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460921.E13466

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

136.30

772.37

908.67

**B. Full Name (Last, First, Middle Initial)**  
 Direct Mail Systems, Inc.

Mailing Address

12450 Automobile Blvd

City	State	Zip Code
Clearwater	FL	33762-

Purpose of Disbursement:  
 0452R direct mail exp

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

183274.17

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12412

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

150.00

850.00

1000.00

**C. Full Name (Last, First, Middle Initial)**  
 McDermott, Will & Emory

Mailing Address

600 Thirteenth St. NW

City	State	Zip Code
Washington	DC	20005-

Purpose of Disbursement:  
 FEC consult

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

186274.17

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12413

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

450.00

2550.00

3000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

600.00

3400.00

4000.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 94 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Charlie Buckels

Mailing Address

202 Somerset Dr

City	State	Zip Code
Lafayette	LA	70506-

 Purpose of Disbursement:  
 MILEAGE
Category/  
Type
 Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

187051.71

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12414

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

112.88

639.66

752.54

**B. Full Name (Last, First, Middle Initial)**  
 Advanced Office Systems

Mailing Address

11434 Industriplex

City	State	Zip Code
Baton Rouge	LA	70884-

 Purpose of Disbursement:  
 printing
Category/  
Type
 Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

182274.17

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12415

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.46

42.27

49.73

**C. Full Name (Last, First, Middle Initial)**  
 Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City	State	Zip Code
Baton Rouge	LA	70810-

 Purpose of Disbursement:  
 REIMBURSEMENT: SEE BELOW
Category/  
Type
 Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189803.18

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12416

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

94.13

533.39

627.52

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

214.47

1215.32

1429.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 95 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Blue Cross Blue Shield

Mailing Address

PO Box 261798

City State Zip Code  
 Baton Rouge LA 70826-

Purpose of Disbursement:  
 HEALTH INSURANCE

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41  
**[MEMO ITEM]** HEALTH INSURANCE

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

627.52

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460921.E13463

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

94.13

533.39

627.52

**B. Full Name (Last, First, Middle Initial)**  
 Direct Mailing Services, Inc

Mailing Address

12511 East Millburn Avenue

City State Zip Code  
 Baton Rouge LA 70815-

Purpose of Disbursement:  
 strategy consult services

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189051.71

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12417

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

300.00

1700.00

2000.00

**C. Full Name (Last, First, Middle Initial)**  
 Federal Express

Mailing Address

P. O. Box 94515

City State Zip Code  
 Palatine IL 60094-4515

Purpose of Disbursement:  
 postage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

181147.66

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12418

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.67

32.13

37.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

305.67

1732.13

2037.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 96 / 107  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
LA Governmental Studies

Mailing Address

PO Box 52129 OCS

 City State Zip Code  
Lafayette LA 70505-

 Purpose of Disbursement:  
legislative directory
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

181221.77

 Date M M / D D / Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12419

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.70		9.60		11.30

**B. Full Name (Last, First, Middle Initial)**  
Blue Cross Blue Shield

Mailing Address

PO Box 261798

 City State Zip Code  
Baton Rouge LA 70826-

 Purpose of Disbursement:  
emp benefit
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

181109.86

 Date M M / D D / Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12420

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.27		182.88		215.15

**C. Full Name (Last, First, Middle Initial)**  
Catherine Clifford

Mailing Address

33826 Nancy Drive

 City State Zip Code  
Walker LA 70785-

 Purpose of Disbursement:  
office maintenance
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

182224.44

 Date M M / D D / Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12421

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7.50		42.50		50.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
41.47		234.98		276.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 97 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Quill

Mailing Address

PO Box 94081

City	State	Zip Code
Palatine	IL	60094-4081

Purpose of Disbursement:  
 ofc supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

190199.78

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460116.E12422

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

14.71

83.38

98.09

**B. Full Name (Last, First, Middle Initial)**  
 William Vanderbrook CPA

Mailing Address

4425 Clearview Pkwy 2nd Floor

City	State	Zip Code
Metairie	LA	70006-2397

Purpose of Disbursement:  
 accounting

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

192199.78

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460116.E12423

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

300.00

1700.00

2000.00

**C. Full Name (Last, First, Middle Initial)**  
 Demco

Mailing Address

P. O. Box 2153

City	State	Zip Code
Birmingham	AL	35287-1340

Purpose of Disbursement:  
 electricity

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189175.66

Date 

M	M
1	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460116.E12424

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

18.59

105.36

123.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

333.30

1888.74

2222.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 98 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 CC Sales

Mailing Address

PO Box 73501

City

State

Zip Code

Metairie

LA

70033-3501

Purpose of Disbursement:  
 Office supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

192232.48

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12425

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.91

27.79

32.70

**B. Full Name (Last, First, Middle Initial)**  
 DH Publications

Mailing Address

17223 Deer Meadow Ave

City

State

Zip Code

Baton Rouge

LA

70816-

Purpose of Disbursement:  
 ofc supplies bus cards

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189902.87

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12426

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.26

69.49

81.75

**C. Full Name (Last, First, Middle Initial)**  
 Hanover Insurance Company

Mailing Address

P. O. Box 4031

City

State

Zip Code

Woburn

MA

01888-4031

Purpose of Disbursement:  
 ins

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

181210.47

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12427

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.42

53.39

62.81

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

26.59

150.67

177.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 99 / 107

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**

The Storage Center

Mailing Address

1970 Staring Lane

City State Zip Code

Baton Rouge LA 70810-

Purpose of Disbursement:  
storage rentalCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

182174.44

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12428

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.60

37.40

44.00

**B. Full Name (Last, First, Middle Initial)**

AICCO, Inc

Mailing Address

1630 E Shaw Ave Ste 160

City State Zip Code

Fresno CA 93710-8109

Purpose of Disbursement:  
InsuranceCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

190101.69

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12429

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

29.82

169.00

198.82

**C. Full Name (Last, First, Middle Initial)**

Karen Connolly

Mailing Address

6880 Christopher

City State Zip Code

Greenwell Springs LA 70739-

Purpose of Disbursement:  
reimburse mileageCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

189821.12

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Transaction ID: H460116.E12430

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.69

15.25

17.94

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.11

221.65

260.76

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 100 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Office Depot Credit Plan

Mailing Address

P. O. Box 9020

City State Zip Code  
 Des Moines IA 50368-9020

Purpose of Disbursement:  
 office supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

186299.17

Date M M / D D / Y Y Y Y  
 1 2 / 1 5 / 2 0 0 5

Transaction ID: H460116.E12431

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.75

21.25

25.00

**B. Full Name (Last, First, Middle Initial)**  
 Karen Connolly

Mailing Address

6880 Christopher

City State Zip Code  
 Greenwell Springs LA 70739-

Purpose of Disbursement:  
 payroll < 25% federal activ

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

180849.63

Date M M / D D / Y Y Y Y  
 1 2 / 0 9 / 2 0 0 5

Transaction ID: H460116.E12436

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

102.51

580.91

683.42

**C. Full Name (Last, First, Middle Initial)**  
 Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City State Zip Code  
 Baton Rouge LA 70810-

Purpose of Disbursement:  
 payroll < 25% FEDERAL ACTIV

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

180166.21

Date M M / D D / Y Y Y Y  
 1 2 / 0 9 / 2 0 0 5

Transaction ID: H460116.E12437

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

197.60

1119.76

1317.36

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

303.86

1721.92

2025.78

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 101 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Ellen Wray Davis

Mailing Address

10426 Springpark Ave

City State Zip Code

Baton Rouge LA 70810-

Purpose of Disbursement:  
 11-11 payroll < 25% federal activit

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

178848.85

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	2	/	2	0	0	5

Transaction ID: H460116.E12440

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

197.60

1119.76

1317.36

**B. Full Name (Last, First, Middle Initial)**  
 Direct Mailing Services, Inc

Mailing Address

12511 East Millburn Avenue

City State Zip Code

Baton Rouge LA 70815-

Purpose of Disbursement:  
 admin consult

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

173819.69

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Transaction ID: H460116.E12441

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

300.00

1700.00

2000.00

**C. Full Name (Last, First, Middle Initial)**  
 Roger Villere

Mailing Address

838 Aurora Avenue

City State Zip Code

Metairie LA 70005-

Purpose of Disbursement:  
 REIMBURSEMENT: SEE BELOW

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167778.64

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Transaction ID: H460116.E12442

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

238.92

1353.91

1592.83

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

736.52

4173.67

4910.19

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 102 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Roger Villere

Mailing Address

838 Aurora Avenue

City State Zip Code

Metairie LA 70005-

Purpose of Disbursement:  
 Mileage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]** Mileage

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

1592.83

Date M M / D D / Y Y Y Y

1 2 / 0 1 / 2 0 0 5

Transaction ID: H460921.E13459

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

238.92

1353.91

1592.83

**B. Full Name (Last, First, Middle Initial)**  
 Aristotle International

Mailing Address

205 Pennsylvania Ave SE

City State Zip Code

Washington DC 20003-

Purpose of Disbursement:  
 software training

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

169383.89

Date M M / D D / Y Y Y Y

1 2 / 0 1 / 2 0 0 5

Transaction ID: H460116.E12443

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

225.00

1275.00

1500.00

**C. Full Name (Last, First, Middle Initial)**  
 Kevin Murphy

Mailing Address

17 Acadia Street

City State Zip Code

Kenner LA 70065-

Purpose of Disbursement:  
 Clerical services

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

171819.69

Date M M / D D / Y Y Y Y

1 2 / 0 1 / 2 0 0 5

Transaction ID: H460116.E12444

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

73.50

416.50

490.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

298.50

1691.50

1990.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 103 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 R & C Properties

Mailing Address

16851 Cicero Ave

City	State	Zip Code
Baton Rouge	LA	70816-1853

Purpose of Disbursement:  
 office rent

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

176531.49

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460116.E12445

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
288.75		1636.25		1925.00

**B. Full Name (Last, First, Middle Initial)**  
 De Lage Landen Financial Srvcs

Mailing Address

P. O. Box 41601

City	State	Zip Code
Philadelphia	PA	19101-1601

Purpose of Disbursement:  
 computer lease

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

174164.29

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460116.E12446

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
51.69		292.91		344.60

**C. Full Name (Last, First, Middle Initial)**  
 Eatel

Mailing Address

P. O. Box 60838

City	State	Zip Code
New Orleans	LA	70160-0838

Purpose of Disbursement:  
 telephone service

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

171329.69

Date 

M	M
1	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	5

Transaction ID: H460116.E12448

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.87		378.93		445.80

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
407.31		2308.09		2715.40

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 104 / 107  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
 Karen Connolly

Mailing Address

6880 Christopher

City	State	Zip Code
------	-------	----------

Greenwell Springs	LA	70739-
-------------------	----	--------

Purpose of Disbursement:  
 reimburse cell phone & ofc supplies

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

174250.55

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Transaction ID: H460116.E12449

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.94

73.32

86.26

**B. Full Name (Last, First, Middle Initial)**  
 DH Publications

Mailing Address

17223 Deer Meadow Ave

City	State	Zip Code
------	-------	----------

Baton Rouge	LA	70816-
-------------	----	--------

Purpose of Disbursement:  
 ofc suppliesa letterhead

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

174606.49

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Transaction ID: H460116.E12450

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

53.39

302.55

355.94

**C. Full Name (Last, First, Middle Initial)**  
 Moreson Conferencing, Inc.

Mailing Address

P O Box 4096

City	State	Zip Code
------	-------	----------

Montgomery	AL	36103-
------------	----	--------

Purpose of Disbursement:  
 phone conference

Category/Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166185.81

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Transaction ID: H460116.E12451

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.66

9.39

11.05

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

67.99

385.26

453.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 105 / 107  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Advanced Office Systems

Mailing Address

11434 Industriplex

City State Zip Code

Baton Rouge LA 70884-

Purpose of Disbursement:  
computer serv & printingCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

167883.89

Date M M / D D / Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: H460116.E12452

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

15.79

89.46

105.25

**B. Full Name (Last, First, Middle Initial)**  
Federal Express

Mailing Address

P. O. Box 94515

City State Zip Code

Palatine IL 60094-4515

Purpose of Disbursement:  
postageCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

166174.76

Date M M / D D / Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: H460116.E12453

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

8.12

45.99

54.11

**C. Full Name (Last, First, Middle Initial)**  
William Vanderbrook CPA

Mailing Address

4425 Clearview Pkwy 2nd Floor

City State Zip Code

Metairie LA 70006-2397

Purpose of Disbursement:  
accountingCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

177531.49

Date M M / D D / Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: H460116.E12454

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

150.00

850.00

1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

173.91

985.45

1159.36

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 106 / 107  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Louisiana

**A. Full Name (Last, First, Middle Initial)**  
Aristotle International

Mailing Address

205 Pennsylvania Ave SE

 City State Zip Code  
Washington DC 20003-

 Purpose of Disbursement:  
software host
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

170883.89

Date 12 / 01 / 2005

Transaction ID: H460116.E12455

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.00		1275.00		1500.00

**B. Full Name (Last, First, Middle Initial)**  
Karen Connolly

Mailing Address

6880 Christopher

 City State Zip Code  
Greenwell Springs LA 70739-

 Purpose of Disbursement:  
Payroll < 25% federal activ
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

165229.86

Date 10 / 18 / 2005

Transaction ID: H460127.E12463

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.51		580.91		683.42

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
327.51		1855.91		2183.42

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
8287.05	46960.25	55247.30

Image# 26940353071

Form/Schedule: **F3XA** THIS AMENDMENT IS IN RESPONSE TO FEC LETTER DATED AUGUST 30,2006. FOR FURTHER DETAILS, SEE FORM 99 FILED SEPT-  
Transaction ID: **C00187450** EMBER 21, 2006. (SAME DATE AS THIS AMENDMENT).

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